

STATE OF NEW HAMPSHIRE 2018 Statement of Income and Expenses

for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

RECEIVED

I. Name of Lobbyist(s):	W. JOHN FUNK		OCT 3 1 2018
II. Name of Lobbyist's partnership, firm or corporation, if any:			NEW HAMPSHIRE DEPARTMENT OF STATE
	GALLAGHER, CALLAHAN & 214 North Main Street, Con		
603-228-1181	603-226-3334		@gcglaw.com
(Telephone)	(Fax)		(Email)
reportable expense transaction	Choose one – file separate reports for as which are not attributable to any one occurring in the month prior to the re	one client.)	
(Full	Name of Client as it appears on the Lol	obyist Registration Form)	
OR All reportable transaction unrelated to any particular clie	ns by the lobbyist (including the lobbying). Int.	st's family), or the lobbying	; firm listed below which are
IV. Date of Report: Ap	oril 25, 2018 🗆	July 25, 201	。 П
•	·	activity from 4/1/18 t	
	m date of registration to 3/31/18	activity from 4/1/10 t	0 0 30/16
Oc	tober 31, 2018 🗵	January 30,	2019 🗖
activity j	from 7/1/18 to 9/30/18	activity from 10/1/18	to 12/31/18
	celved and no reportable transaction just this form and submit it to the Secre		
VI. Check if additional repor	ts are attached:		
☐ If you have received fees o	r made expenditures, you must file Ad	dendum A – Fees and Expe	enses
☐ If you have paid an honora Expense Reimbursement	rium or reimbursed expenses, you mus	t file Addendum B – Repo	rt of Honorariums or
If you, your firm, or your f	amily has made political contributions,	you must file Addendum (C – Political Contributions
Sworn Statement/Affirmation I have read RSA 15, RSA 15-B to the best of my knowledge and	and RSA 664 and hereby swear or affin	rm that the foregoing inform	nation is true and complete
(Signature of Lobby)			\\(\(\gamma - 1 \) \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
		(1)	,
W. JOHN FUNK (Print Name of lobbyist)			



STATE OF NEW HAMPSHIRE Lobbyists Report of Political Contributions Addendum C

(RSA Chapter 15:6)

I. Name of lobbyist's partnership, firm or corporation, if any: GALLAGHER, CALLAHAN & GARTRELL, P.C.					
II. Name of Client		Date	October 31, 2018		
Political Contributions For each political contributi Elient/lobbyist and lobbying	on that is reportable pursuant to firm, indicate the following:	RSA Chapter 664 p	paid on behalf of the		
	Political Action Committee:		MOLLY KELLY		
Full name of candidate:	(Last Name)	MOLLY (First Name)	(Middle Name/Initial)		
Amount of Contribution \$100.	00 Office Candidate is Seeking	GOVERNOR			
enter an estimated value and the	e word "estimate."				
enter an estimated value and th					
	Political Action Committee:				
		(First Name)	(Middle Name/Initial)		
Full name of candidate:	Political Action Committee:	,			
Full name of candidate: Amount of Contribution \$	Political Action Committee: (Last Name) Office Candidate is Seeking d contribution, provide a description on the line above for amounts.	on of the goods or serv	rices provided, and enter the		
Full name of candidate: Amount of Contribution \$ If the contribution is an in-kine actual cost of the in-kind contribution is an in-kine actual cost of the in-kind contribution is an in-kine contributi	Political Action Committee: (Last Name) Office Candidate is Seeking d contribution, provide a description on the line above for amounts.	on of the goods or serv	rices provided, and enter the		
Full name of candidate: Amount of Contribution \$ If the contribution is an in-kine actual cost of the in-kind contribution is an in-kine actual cost of the in-kind contribution is an in-kine contributi	Political Action Committee: (Last Name) Office Candidate is Seeking d contribution, provide a description button on the line above for amoune word "estimate."	on of the goods or serv	rices provided, and enter the		
Full name of candidate: Amount of Contribution \$ If the contribution is an in-kinactual cost of the in-kind contributer an estimated value and the	Political Action Committee: (Last Name) Office Candidate is Seeking d contribution, provide a description ibution on the line above for amoune word "estimate." Political Action Committee:	on of the goods or serv	rices provided, and enter the		
Full name of candidate: Amount of Contribution \$ If the contribution is an in-kine actual cost of the in-kind contribution is an in-kine actual cost of the in-kind contribution is an in-kine contributi	Political Action Committee: (Last Name) Office Candidate is Seeking d contribution, provide a description ibution on the line above for amoune word "estimate." Political Action Committee:	on of the goods or serv	rices provided, and enter the		
Full name of candidate: Amount of Contribution \$ If the contribution is an in-kinactual cost of the in-kind contributer an estimated value and the	Political Action Committee: (Last Name) Office Candidate is Seeking d contribution, provide a description bution on the line above for amoune word "estimate." Political Action Committee: (Last Name)	on of the goods or servent of contribution. If	ices provided, and enter the the actual cost is not known,		

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."				
If more than three contributions were made, report additional contributions	on separate addendum C forms.)			
Sworn Statement/Affirmation by Lobbyist have read RSA 15, RSA 15-B and RSA 664 and hereby swe s true and complete to the best of my knowledge and belief.				
By: (Signature of lobbyist)	(Date)			
W. JOHN FUNK (Print Name of Lobbyist)				